



WASHINGTON STATE DEPARTMENT OF  
**Natural Resources**

Jennifer M. Belcher - Commissioner of Public Lands  
Kaleen Cottingham - Supervisor

**APPLICATION FOR  
SURFACE MINING  
RECLAMATION PERMIT  
(Form SM-2)**

This application is for (check one): ☐ New Permit ☐ Revision of Existing Permit ☐ Transfer of Permit

NAME OF COMPANY OR INDIVIDUAL APPLICANT(S) This will be the name on the permit. (Type or Print in ink.)		TOTAL ACREAGE OF PERMIT AREA (Include all acreage to be disturbed by mining, setbacks and buffers, and associated activities during the life of the mine.)  _____ acres				
MAILING ADDRESS		COUNTY _____ No attachments will be accepted. Legal description of permit area:				
Telephone		1/4	1/4	Section	Township	Range
SURFACE OWNERSHIP Give names, addresses, and signatures of all individuals with possessory interest in land. (Attach signed copies of this document if more than one.)						
I verify that the applicant has my permission to mine from my land. Signature of Owner _____ Date _____						
OWNERSHIP OF RIGHTS TO REMOVE MINERALS BY SURFACE MINING. Give names, addresses, and signatures of all individuals with rights. (Attach signed copies of this document if more than one.)		Application fee of \$650.00 for a new reclamation permit is herewith attached? <input type="checkbox"/> Yes <input type="checkbox"/> No				
I verify that the applicant has my permission to mine from this land. Signature of Owner _____ Date _____		Street address and milepost of surface mine				
Do you or any person, partnership, or corporation associated with you now hold, or have held, a surface mining operating or reclamation permit? <input type="checkbox"/> Yes <input type="checkbox"/> No		Distance (miles)		Direction from		Nearest community
If you answered 'Yes' to the above, please list: Permit Number _____ Active Operation _____ Reclamation Current or Complete _____		Method of mining		Maximum depth of mine		
Expected start date of mining		Estimated number of years		Estimated annual production <input type="checkbox"/> tons, or <input type="checkbox"/> cu yds		
Minerals to be mined		Total quantity to be mined over life of mine (estimated): <input type="checkbox"/> tons, or <input type="checkbox"/> cu yds				
Have you ever had a mining operating or reclamation permit revoked? <input type="checkbox"/> Yes <input type="checkbox"/> No		Have you ever had a reclamation security forfeited? <input type="checkbox"/> Yes <input type="checkbox"/> No				
If you answered 'Yes' to the above give permit number(s)						
Are all of these mines now in compliance with RCW 78.44, WAC 332-18, and conditions of the permits? <input type="checkbox"/> Yes <input type="checkbox"/> No						
The applicant shall be considered as the permit holder for this surface mine and shall be responsible for compliance with RCW 78.44, WAC 332-18, the approved reclamation plan (Form SM-8A) and attachments, and the conditions of the permit if issued by the Department of natural Resources.						
Signature of company representative or individual applicant(s)		Name and title of company representative (Please print)			Date signed	
<b>FOR DEPARTMENT USE ONLY:</b>						
Date Accepted		Accepted By			DNR Reclamation Permit No.	